

Work Order ID **93919*****93919***

Page 1

November-27-12 3:02:01 PM

Item ID: **D4708-9**

Accept

N900040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Lanyard

Start Date: 11/27/12 Start Qty: 2.00

Required Date: 12/07/12 Req'd Qty: 2.00

Cust Item ID:

Customer:

Reference:

Approvals:

Process Plan: ML5Date: 12-11-29

Tooling:

Date:

QC:

Date:

SPC (Y/N):

Date:

Run Start ***NR1***Stop ***NR2***

| Sequence ID/ Work Center ID | Operation Description | Set Up/ Run Hours | Tool ID | Tool # | Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|

Draw Nbr

Revision Nbr

D4708

A

0.00

110

110

Purchasing

Memo

0.00

Purchasing

Issue P/O: 18553

Manufacture as per dwg

Possible supplier: LEXCO CABLE MFG INC.

Material release note is required.

CX 12/11/30 12

120

Receive & Inspect for Damage & Mat'l Certs

0.00

120

Packaging

Memo

0.00

Packaging

12/12/10 (12)

130

QC6- Inspect dimensions to drawing

0.00

130

QC

Memo

0.00

Quality Control

(12) 12-12-10

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | |
|--|-------------|-------------|---|---|--------------------------|---|------------------------|---------------------|--|--|---|--|
| Work Order: _____ Part No. _____ NCR No. _____ | | | | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | | AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div> | | | | | | |
| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector | | | |
| Doc/Data <input type="checkbox"/> | | | | | | | | | | | | |
| Equip/Tooling <input type="checkbox"/> | | | | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | | | | |
| FAULT CATEGORY | | | | | | | | | | | | |
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | | | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | | | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions | | | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge | | <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other | |

November-27-12 3:02:01 PM

Page 2

Reference:

Stop *NR2*

[illegible]

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |
| Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data | | | | | | | | | |
| Equip/Tooling | | | | | | | | | |
| Operator | | | | | | | | | |
| Material | | | | | | | | | |
| Setup | | | | | | | | | |
| Other | | | | | | | | | |
| Process | | | | | | | | | |
| Supplier | | | | | | | | | |
| Training | | | | | | | | | |
| Unapproved | | | | | | | | | |

FAULT CATEGORY

| | | |
|--|---|--|
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other |
|--|---|--|

Picklist Print

November-27-12 3:02:00 PM

Page 1

Work Order ID: 93919

Parent Item: D4708-9

Parent Item Name: Lanyard

Start Date: 11/27/12

Required Date: 12/07/12

Start Qty: 2.00

Required Qty: 2.00

Comments: IPP REV:A 12.09.10 NEW ISSUE DD VERF:JFS

| Component Item ID/ Item Name | Replacement Item ID | Mfg/ Purch | Bin Item | Primary Location | Last Location | Route Seq ID | Unit of Measure | Qty on Hand | Qty per Kit | Total Qty | Qty Issued | Date Issued | Status |
|---------------------------------|------------------------|---------------|-------------|---------------------|------------------|-----------------|--------------------|----------------|-------------|--------------|---------------|----------------|--------|
| D4708-9P Lanyard | | Purchased | No | | | 120 | Each | 0.0000 | 1 | 2 | | | |

12/12/10 (12)

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

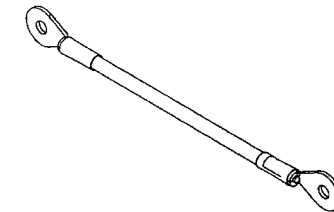
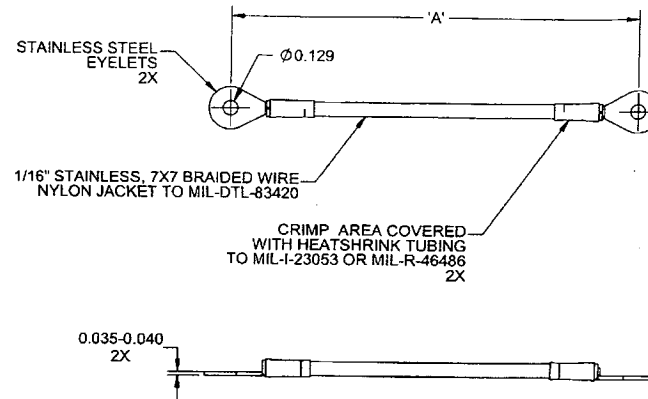
| | | | | | | | | | | | | | | | | | | |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
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| Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data | | | | | | | | | |
| Equip/Tooling | | | | | | | | | |
| Operator | | | | | | | | | |
| Material | | | | | | | | | |
| Setup | | | | | | | | | |
| Other | | | | | | | | | |
| Process | | | | | | | | | |
| Supplier | | | | | | | | | |
| Training | | | | | | | | | |
| Unapproved | | | | | | | | | |

FAULT CATEGORY

| | | |
|--|---|--|
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other |
|--|---|--|

SPECIFICATION CONTROL DRAWING



D4708-X LANYARD

| DART P/N | DIM 'A' |
|----------|---------|
| D4708-1 | 3.5 |
| D4708-3 | 5.0 |
| D4708-5 | 8.0 |
| D4708-7 | 10.0 |
| D4708-9 | 12.0 |

NOTES:

- 1) MATERIAL: AS INDICATED
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: IDENTIFY WITH DART P/N "D4708-1" AND B/N "BXXXXX" PER QSI 044 6.7
- 7) WEIGHT: TBD lbs
- 8) RECOMMENDED SUPPLIER: LEXCO CABLE MFG INC.

SUBJECT: UNCONTROLLED
 ENGINEERING
 WORK
 WORK
 NO. 93919 MLC
 12-11-29
 2012-10-12

| | | | | | |
|------------|-------------|---|--------------|----|----------|
| A | | NEW ISSUE | | RP | 12.09.19 |
| REV. | DESCRIPTION | | | BY | DATE |
| DESIGN | RP | DART AEROSPACE USA, INC. | | | |
| DRAWN | RP | KENT, WA | | | |
| CHECKED | A.P. | DRAWING NO. | REV. A | | |
| MFG. APPR. | | D4708 | SHEET 1 OF 1 | | |
| APPROVED | | TITLE | SCALE | | |
| DE APPR. | | LANYARD | NTS | | |
| DATE | 12.09.19 | COPYRIGHT © 2012 BY DART AEROSPACE USA, INC. THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR REPRODUCED IN ANY MANNER WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE USA, INC. | | | |



Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PURCHASE ORDER

Purchase Order ID **PO18553**

Purchase Order Date 11/30/12

PO Print Date 11/30/12

Page Number 1 of 1

Order From :

VU-LEX003

LEXCO CABLE MFG & DISTRIBUTORS INC.
7320 W AGATITE
NORRIDGE, IL 60706
USA

Contact Name

Vendor Phone

Vendor Fax

Vendor Account Nbr

800-626-6556

773-478-4584

Buyer

Requisition Nbr

Tax Resale Nbr

Terms

Currency

FOB

Chantal Lavoie

10127-2607

Net 30

USD

Destination-Collect

Ship To :

DART AEROSPACE LTD 1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
CANADA

FAXED
~~CLAMP~~

| Line Nbr | Reference Revision ID Vendor Part Number | Description/ Mfg ID | Req Date/ Taxable | Req Qty/ Unit of Measure | Ship Method | Unit Price | Extended Price |
|----------|--|------------------------|----------------------|-----------------------------|------------------|------------|-------------------|
| 1 | D4708-9P | Lanyard | 12/12/12 Yes | 12.00 Each | FedEx PI collect | \$4.4800 | \$53.76 |

Special Inst: AS PER DWG D4708 REV. A
B93919

PO Total:

\$53.76

CERTIFICATE OF CONFORMITY
REQ'D UPON DELIVERY

Change Nbr:

1

Change Date: 11/30/12

No substitution or deviation without
consent.

Certificate of Conformity or Material
Certification required **YES** NO

LEXCO CABLE MFG & DISTRIBUTORS, INC.
 7320 WEST AGATITE
 NORRIDGE, IL 60706
 T 800-626-6556 F 773-478-4584
 (773) 588-8890

PICKED BY

PACKED BY

SHIPPED BY

7.6
D.A.B.

PACKING LIST

ORDER DATE: 12/4/2012
 SALESPERSON: IE

ORDER NUMBER: 0156824
 CUSTOMER NUMBER: 01-0011993

SOLD TO:
 DART AEROSPACE LTD
 1270 Aberdeen Street
 Hawkesbury, Ontario, ON K6A 1K7

SHIP TO:

DART AEROSPACE LTD
 1270 Aberdeen Street
 Hawkesbury, Ontario, ON K6A 1K7

PHONE #: 613-632-5200

DATE SHIPPED:

12/7/12

CUSTOMER P.O.
 18553

SHIP VIA
 FEDEX P1

F.O.B.
 #151793240 COLL

TERMS
 NET 30

| ORDERED | U/M | SHIP B/O | ITEM NUMBER | DESCRIPTION | PRICE |
|---------|-----|------------------------|-------------|----------------|--------|
| 12 | EA | <u>12</u> 6 | D4708-9P | Cable Assy 12" | 4.4800 |

PER DWG D4708 REV A - B93919

SHIP 12/10/12

 ORIGINAL

ENTERED BY

FORM QOP-03-01-01F
 REV 061900

FREIGHT

CHARGES

TOTAL

PACKING LIST

COMMERCIAL INVOICE

| | |
|--------------------------|--|
| SHIP DATE: 12/7/2012 | Bill of Lading / Air Waybill No.: 794246248294 |
| INVOICE / ORDER: 0259567 | PRO: |
| PO: 18553 | FTR Exemption: NO EEI 30.36 |
| Reason for Export: Sale | TERMS OF SALE: DDP |

| | |
|---|--|
| SHIPPER/EXPORTER LEXCO 7320 W AGATITE NORRIDGE, IL 60706 PHONE NO. (773) 588-8890 | CONSIGNEE DART AEROSPACE LTD 1270 Aberdeen Street Hawkesbury, Ontario, ON K6A 1K7 CANADA PHONE NO. (613) 632-5200 |
|---|--|

| | |
|-----------------------------|-------------------------------|
| BROKER PHONE NO. | IMPORTER PHONE NO. |
|-----------------------------|-------------------------------|

| | | | |
|---------------|-------------------------------|--|--------------------------|
| IRS / EIN # / | POINT (STATE) OF ORIGIN IL | EXPORTING CARRIER FedEx International Priority® | MODE OF TRANSPORT Air |
|---------------|-------------------------------|--|--------------------------|

| DESCRIPTION OF GOODS | | | | |
|----------------------|-------------------------------|---|-------------------|--|
| # UNITS UOM | SCHEDULE B CLASSIFICATION NO. | DESCRIPTION | COUNTRY OF ORIGIN | UNIT VALUE VALUE (U.S. dollars) (Selling price or cost if not sold) |
| 1.00000 NMB | 7312102500 ARTICLES | STRANDED WIRE OF IRON OR STEEL FITTED WITH FITTINGS OR MADE UP INTO | US | 53.76000 53.76 |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

| | | |
|-----------------------------|---|---------------------------|
| TOTAL VALUE 53.76 | | |
| FREIGHT CHARGES 0.00 | OTHER CHARGES (Specify) Other Charges 0.00 | INSURANCE CHARGES 0.00 |
| TOTAL # OF PACKAGES 1 | TOTAL WEIGHT 0 lbs | DISCOUNT 0.00 |
| TOTAL EXTRA CHARGES 0.00 | | INVOICE TOTAL 53.76 |

I hereby certify that the information on this invoice is true and correct, and the contents and value of this shipment is as stated above.

SHIPPER / EXPORTER Tom Buode MGR DATE 12.7.12

These commodities, technology or software were exported from the United States in accordance with the Export Administration Regulations. Diversion contrary to U.S. law is prohibited.